



Southern African HIV Clinicians Society 3rd Biennial Conference

13 - 16 April 2016
Sandton Convention Centre
Johannesburg

**Our Issues, Our Drugs,
Our Patients**

www.sahivsoc.org
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Directly observed therapy (DOT)

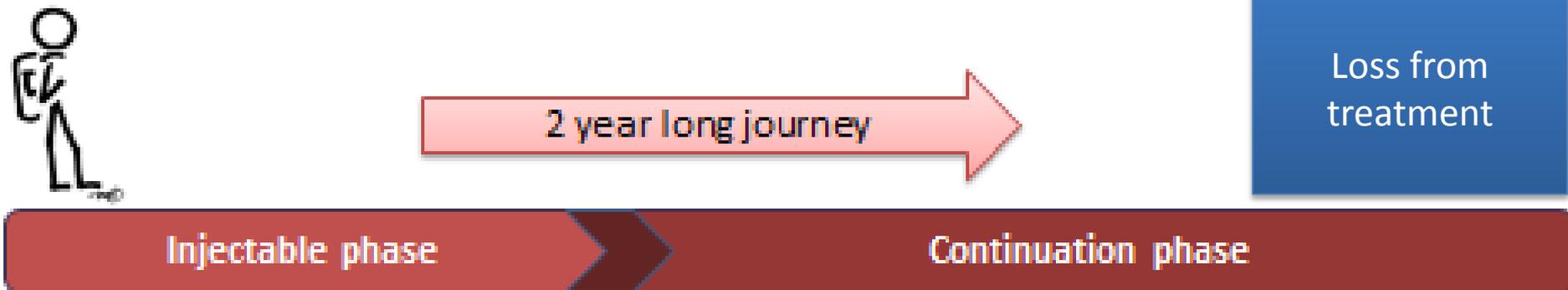
“National Department of Health recommendation for RR-TB treatment administration”

- Patient travels to clinic daily
- Treatment is taken under the watchful eye of a nurse



Clinic based DOT

- DOT may impede adherence
 - Daily clinic visits can disrupt daily activities of life
 - Busy clinics may lead to waiting periods
- DOT is resource intensive



Is there an alternative to DOT after the intensive phase?

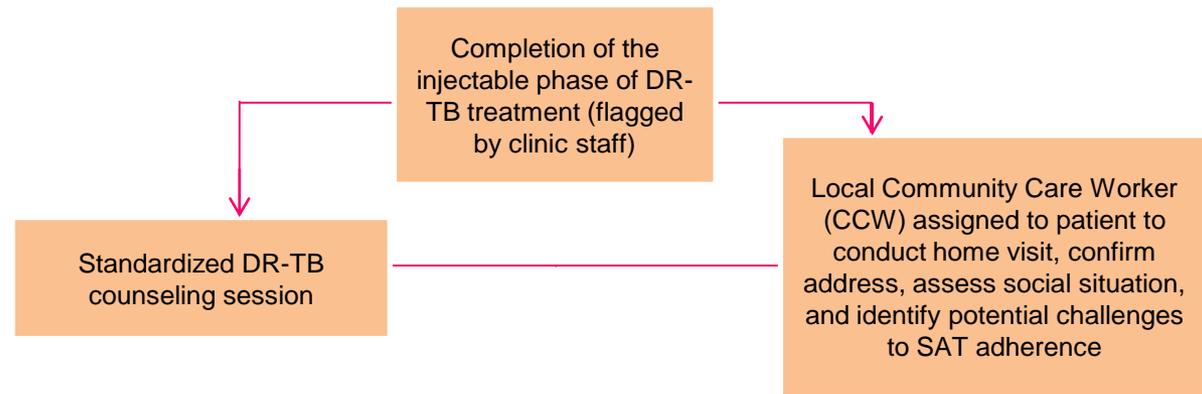
Self-Administration of Treatment (SAT)

- Implemented within the 'TB/HIV Integrated Adherence Framework'
- Multi disciplinary team approach
- Eligibility dependent on inclusion Criteria
 - Intensive phase complete
 - Clinically stable
 - Culture Negative
 - Supportive home environment
 - Fairly good adherence

Objective and benefits of SAT

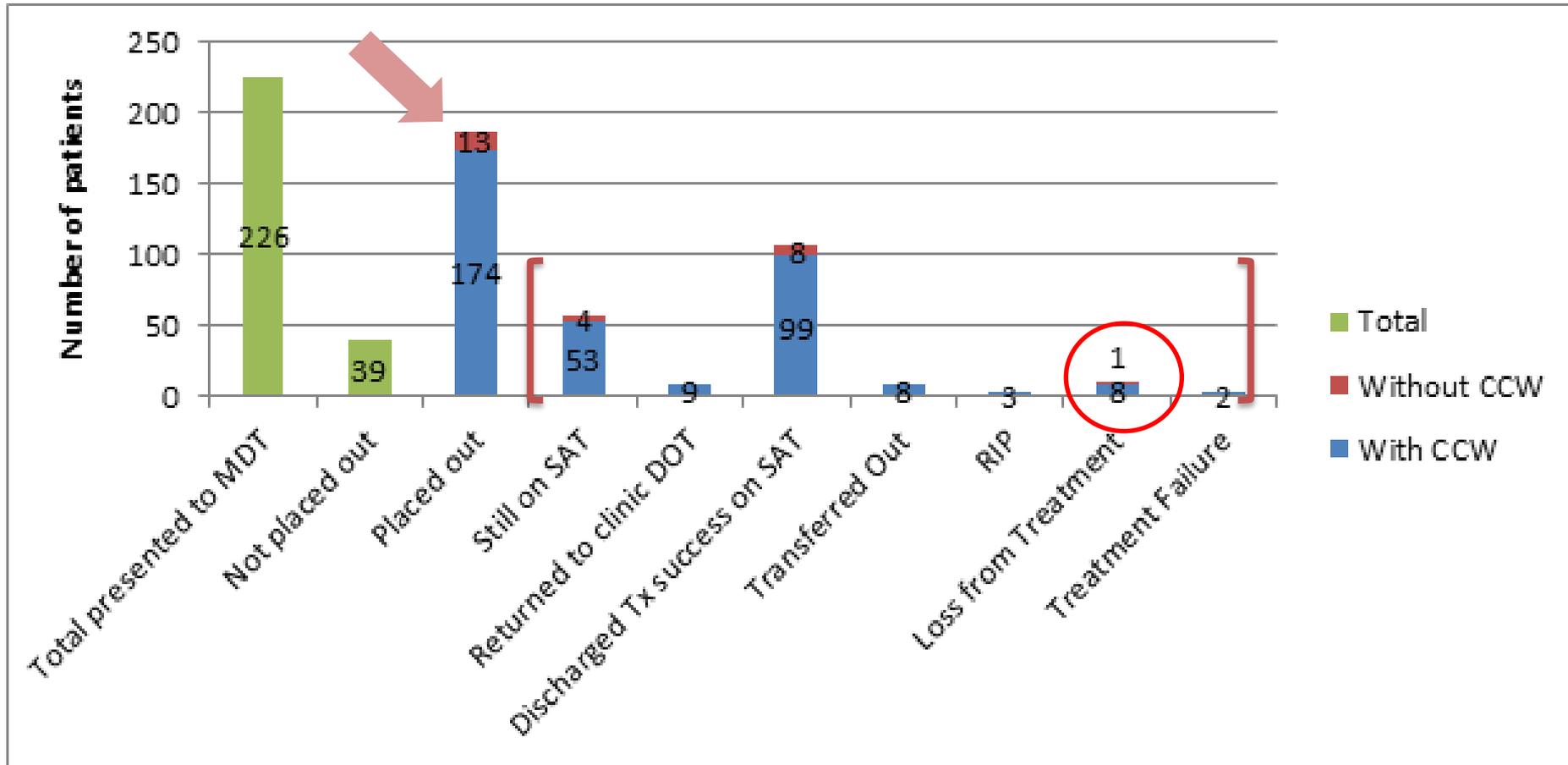
- To improve adherence to treatment by eliminating all the barriers posed by DOT
- Benefits
 - Patient can return to activities of daily living
 - Improved quality of life
 - Self empowerment / ownership of treatment
 - Decongest clinics

Self Administered Treatment (SAT) Intervention



Results

Interim Outcomes for patients enrolled onto SAT since 2012



Conclusions

- Alternatives to DOT after the intensive phase are urgently needed in high burden settings
- Interim SAT outcomes indicate that the majority of patients enrolled have either been successfully treated or are still on treatment
- SAT after intensive phase is a feasible method to promote patient autonomy and relieving pressure on clinics

Recommendation

SAT should be implemented in settings with capacity and technical guidance to provide structured patient support and adapted to fit within the local context



Resources



Médecins sans Frontières (MSF) Khayelitsha

PATIENT SUPPORT INTERVENTIONS TO IMPROVE ADHERENCE
TO DRUG RESISTANT TUBERCULOSIS TREATMENT

COUNSELLING TOOLKIT



Acknowledgements

- City and Province clinic staff
- RR-TB patients and their families
- MSF Khayelitsha team and government structures



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